

RQ-2

August 4, 2016

GLENN K.C. CHING, TREASURER
CENTRAL PACIFIC BANK FED PAC AKA;
CPB PAC-FED
220 SOUTH KING STREET
HONOLULU, HI 96813

Response Due Date 09/08/2016

IDENTIFICATION NUMBER: C00130385

REFERENCE: APRIL QUARTERLY REPORT (01/01/2016 - 03/31/2016)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. Failure to adequately respond by the response date noted above could result in an audit or enforcement action. Additional information is needed for the following 1 item(s):

- Your report(s) was not signed by the treasurer or designated agent listed on your Statement of Organization (FEC Form 1). Please amend your report(s) by providing the signature of an individual that is authorized to sign the report(s). If a new treasurer has been appointed, please file an amended Statement of Organization or a letter (if not an electronic filer) to reflect this change. (52 U.S.C. §30104(a)(1) (formerly 2 U.S.C. §434(a)(1)) and 11 CFR §104.14(a) and (d))

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. Requests for extensions of time in which to respond will not be considered.

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please

CENTRAL PACIFIC BANK FED PAC AKA; CPB PAC-FED

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contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1157.

Sincerely,

Laura Sinram

Sr. Campaign Finance & Reviewing Analyst

Reports Analysis Division

Jaura & Sirrano

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FEC FORM 1

STATEMENT OF ORGANIZATION



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		=	Omde in se indian 10 111
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
CENTRAL PACIFIC F	BANK (AKA: CPB P	AC-FED)	
ADDRESS (number and street)	220 S. KING S	TREET	
(Check if address	1		
is changed)	HONOLULU		LHI. 100012
	CITY		HI 96813 - I STATE ▲ ZIP CODE ▲
6			2 6652
COMMITTEE'S E-MAIL ADDRE	:SS		
(Check if address is changed)	glenn.ching@ce	entralpacificbank	.com
	Optional Second E-Mail Ad	ddress	
			
<u> </u>			
©OMMITTEE'S WEB PAGE AD	DRESS (URL)		
(Check if address is changed)	www.centralpa	cificbank.com	
©OMMITTEE'S WEB PAGE AD (Check if address is changed) 4 9 9 1	Limin		
Ž 2. DATE 08 ' 1	1 2016		
3. FEC IDENTIFICATION N	UMBER ▶ C	00130385	
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)	
I certify that I have examined the	his Statement and to the bes	at of my knowledge and belief i	t is true, correct and complete.
	Clarr V.C. C	hine	
Type or Print Name of Treasure	Glenn K.C. C	ning	
Signature of Treasurer			Date 08 ' 11 ' 2016
NOTE: Submission of false, erron		n may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530	ECL. CLICKY I

FEC Form 1 (Revised 02/2009)

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		OMMITTEE Committee:		
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)		
(b)	The state of the s	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)		
Name Cand				
Cand Party	date Affiliatio	on State Sought: House Senate President District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Candi				
Part	y Con	nmittee:		
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.		
Polit	ical A	ction Committee (PAC):		
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:		
		X Corporation Corporation w/o Capital Stock Labor Organization		
		Membership Organization Trade Association Cooperative		
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)		
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint	Fund	Iraising Representative:		
(g)	: i i	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.		
	Committees Participating in Joint Fundraiser			
	1.	FEC ID number		
	2.	FEC ID number C		
	3.	FEC ID number		
	4.	FEC ID number C		

l 	FEC Form 1 (Revised (92/2009)	Page 3
Write	te or Type Committee Name		
6. N	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Representative, or Lea	adorship BAC Spansor
			dership PAC Sponsor
CE.	NTRAL PACIFIC	BANK FED PAC (AKA: CPB PAC-FED)	
<u> </u>	Mailing Address	220 S. KING STREET	
	g		
		HONOLULU HI 90	5813 - ZIP CODE
R	delationship: $\widehat{\hat{f X}}$ Connected	Organization Affiliated Committee Joint Fundraising Representative	
bo	Custodian of Records: Identification of Records.	tify by name, address (phone number optional) and position of the person i	n possession of committee
, F	GLENN	KC CHING	
M	failing Address	220 S. KING STREET	
Fi M		HONOLULU HI 9	6813 -
) Ti	îtle or Position	CITY STATE	ZIP CODE
L	Custodian of R	ecords Telephone number 808	- 544 - 3531
	reasurer: List the name and ny designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	ne name and address of
	ull Name f Treasurer GLENN	KC CHING	
М	lailing Address	220 S. KING STREET	
		HONOLULU , HI, 19	6813 []
		CITY STATE	ZIP CODE
	itle or Position Treasurer	Telephone number 808	- [544] - [3531]

_	FEC Form	1 (Revised 02/2009)	Page 4
	Full Name of Designated Agent	DENIS K. ISONO	
	Mailing Address	220 SOUTH KING STREET	
		HONOLULU HI CITY STATE	96813 - L. J. ZIP CODE
2 0 1 6	Title or Position Designat	ed Agent Telephone number	808 - 544 - 6881
9.	Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee deposites or maintains funds.	ts funds, holds accounts, rents
8	Name of Bank, D	epository, etc.	
Oo He On Oogayoon		CENTRAL PACIFIC BANK	
Q	Mailing Address.	220 SOUTH KING STREET	
<u></u>			
Õ		HONOLULU	96813
9		CITY STATE	ZIP CODE
99	Name of Bank, D	repository, etc.	
9			
	Mailing Address		
		CITY STATE	ZIP CODE

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Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
PREPARER (3/2015)	8/16/16 DATE PREPARED